

## CLAIMS ONLY

Application Number

10 | 758.409

Filing Date

**Applicant(s)**

- May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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49						
50						
Total Indep	2		2			
Total Depend	59		59			
Total Claims	61		61			